

# Public Act No. 18-48

# AN ACT CONCERNING THE LEGISLATIVE COMMISSIONERS' RECOMMENDATIONS REGARDING TECHNICAL REVISIONS TO THE PUBLIC HEALTH STATUTES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. Subsection (a) of section 16-247e of the 2018 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

(a) In order to ensure the universal availability of affordable, high quality telecommunications services to all residents and businesses throughout the state regardless of income, disability or location, the authority shall (1) periodically investigate and determine, after notice and hearing, local service options, including the definition and components of any basic telecommunications services, necessary to achieve universal service and meet customer needs; and (2) establish lifeline and telecommunications relay service programs funded by all telecommunications carriers that provide intrastate telecommunications services, as such terms are defined in 47 USC 153, as amended from time to time, sufficient to provide low-income households or individuals or [speech and] persons who are hard of hearing or speech impaired with a level of telecommunications service or package of telecommunications services that supports participation

in the economy and society of the state. The authority shall apportion the funding for the lifeline and telecommunications relay service programs among telecommunications carriers on an equitable basis based on the gross revenues of each telecommunications carrier that are generated in Connecticut, both interstate and intrastate. The lifeline and telecommunications relay service programs shall be administered by an entity authorized, and subject to oversight, by the authority. The authority shall determine by order which customers qualify for the lifeline program. Recipients of lifeline funds shall use such funds to pay for telecommunications services provided by any telecommunications carrier.

- Sec. 2. Subsections (b) to (e), inclusive, of section 17a-667a of the 2018 supplement to the general statutes are repealed and the following is substituted in lieu thereof (*Effective from passage*):
- (b) On or before October 1, 2017, the Connecticut Alcohol and Drug Policy Council, established under section 17a-667, shall develop (1) a one-page fact sheet that includes, in clear and readily understandable language in at least twelve-point font size, the risks of taking an opioid drug, the symptoms of opioid use disorder and services available in the state for persons who experience symptoms of or are otherwise affected by opioid use disorder, and (2) strategies to encourage health care providers and pharmacists to disseminate the one-page fact sheet. Such one-page fact sheet shall be made available on the Internet web site of the Department of Mental Health and Addiction Services for use by health care providers and pharmacists to disseminate to any person (A) whom such provider treats for symptoms of opioid use disorder, (B) to whom such provider issues a prescription for or administers an opioid drug or opioid antagonist, or (C) to whom such pharmacist dispenses an opioid drug or opioid antagonist or issues a prescription for an opioid antagonist.
- (c) (1) The <u>Connecticut</u> Alcohol and Drug Policy Council shall **Public Act No. 18-48**2 of 10

examine the feasibility of the following:

- (A) Developing a marketing campaign and making monthly public service announcements on the Internet web sites and social media accounts of the appropriate state agencies, as designated by the council, and any radio station and television station broadcasting to persons in the state, regarding (i) the risks of taking opioid drugs, (ii) symptoms of opioid use disorder, (iii) the availability of opioid antagonists in the state, and (iv) services in the state for persons with or affected by opioid use disorder; and
- (B) Establishing a publicly accessible electronic information portal, in the form of an Internet web site or application, as a single point of entry for information regarding the availability of (i) beds at a facility in the state for persons in need of medical treatment for (I) detoxification for potentially life-threatening symptoms of withdrawal from alcohol or drugs, and (II) rehabilitation or treatment for alcohol dependency, drug dependency or intoxication, and (ii) slots for outpatient treatment using opioid medication that is used to treat opioid use disorder, including methadone and buprenorphine. Such examination shall include the ability of the portal to (I) provide real-time data on the availability of beds and slots, including, but not limited to, the types of beds and slots available, the location of such beds and slots and the wait times, if available, for such beds and slots, and (II) be accessible to the public.
- (2) Not later than January 1, 2019, the council shall report, in accordance with the provisions of section 11-4a, to the joint standing committee of the General Assembly having cognizance of matters relating to public health on the outcome of such examination.
- (d) The <u>Connecticut</u> Alcohol and Drug Policy Council shall convene a working group to advise the council of any recommendations for statutory or policy changes that would enable first responders or

health care providers to safely dispose of a person's opioid drugs upon their death. Not later than February 1, 2018, the council shall report, in accordance with the provisions of section 11-4a, to the joint standing committee of the General Assembly having cognizance of matters relating to public health regarding the recommendations of the working group.

- (e) The <u>Connecticut</u> Alcohol and Drug Policy Council shall convene a working group to study substance abuse treatment referral programs that have been established by municipal police departments to refer persons with an opioid use disorder or seeking recovery from drug addiction to substance abuse treatment facilities. The working group shall (1) examine such referral programs, (2) identify any barriers faced by such referral programs, and (3) determine the feasibility of implementing such programs on a state-wide basis. Not later than February 1, 2018, the council shall report, in accordance with the provisions of section 11-4a, to the joint standing committees of the General Assembly having cognizance of matters relating to public health and public safety and security regarding the findings of the working group.
- Sec. 3. Subdivision (8) of subsection (c) of section 17b-28 of the 2018 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):
- (8) The executive director of the Commission on Women, Children and Seniors, or the executive director's designee;
- Sec. 4. Subdivision (10) of subsection (b) of section 19a-14 of the 2018 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):
- (10) The Connecticut Board of Examiners of Embalmers and Funeral Directors, established under section 20-208;

Sec. 5. Section 19a-36k of the 2018 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

If a director of health has reasonable cause to suspect the possibility of a food-borne illness or food-borne outbreak, such director shall complete an investigation and take action to control the illness or outbreak. Such action may include, but [shall] need not be limited to, securing employee morbidity histories, requiring medical and laboratory examinations of an employee, modification of a menu and any other restriction or action deemed necessary by such director of health to control the illness or outbreak. A person who violates any provision of sections 19a-36h to 19a-36m, inclusive, section 22-6r, as amended by this act, or section 22-6s, or who provides false information during an investigation, refuses to cooperate with an investigation or otherwise impedes an investigation that is conducted under this section or section 19a-36i or 19a-36j shall be guilty of a class C misdemeanor.

- Sec. 6. Subsection (d) of section 19a-755b of the 2018 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):
- (d) Not later than January 1, 2018, and annually thereafter, to the extent practicable, the Health Information Technology Officer shall issue a report, in a manner to be decided by the officer, that includes the (1) billed and allowed amounts paid to health care providers in each health carrier's network for each service and procedure [service] included pursuant to subsection (c) of this section, and (2) out-of-pocket costs for each such service and procedure.
- Sec. 7. Subdivision (5) of section 20-65f of the 2018 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

- (5) "Physically active individual" means any person who is (A) (i) a member of any professional, amateur, school, collegiate or other sports organization, (ii) a regular participant in a sports activity, or (iii) a participant in an exercise, recreational or employment activity that requires strength, agility, flexibility, range of motion, speed or stamina that is comparable to the strength, agility, flexibility, range [or] of motion, speed or stamina required of a regular participant in a sports activity, and (B) deemed healthy by a health care provider;
- Sec. 8. Subsection (d) of section 20-65k of the 2018 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):
- (d) For registration periods beginning on [or] and after October 1, 2017, a licensee who provides direct patient care services and who is applying for license renewal shall maintain professional liability insurance, or other indemnity against liability for professional malpractice, unless such insurance or other indemnity is provided by the licensee's employer. The amount of insurance that each such licensee shall carry as insurance or indemnity against claims for injury or death for professional malpractice shall not be less than five hundred thousand dollars for one person, per occurrence, with an aggregate of not less than one million five hundred thousand dollars.
- Sec. 9. Subsection (a) of section 20-185i of the 2018 supplement to the general statutes, as amended by section 188 of public act 17-2 of the June special session, is repealed and the following is substituted in lieu thereof (*Effective July 1, 2018*):
- (a) As used in this section and sections 10-76ii, 10-145t, 19a-14, <u>as amended by this act</u>, [subdivision (1) of subsection (e) of section 19a-88,] sections 20-185j to 20-185m, inclusive, and section 20-413:
  - (1) "Behavior Analyst Certification Board" means the nonprofit

corporation established to meet the professional credentialing needs of behavior analysts, governments and consumers of behavior analysis services and accredited by the National Council for Certifying Agencies in Washington, D.C., or any successor national accreditation organization;

- (2) "Behavior analysis" means the design, implementation and evaluation of environmental modifications, using behavior stimuli and consequences, including the use of direct observation, measurement and functional analysis of the relationship between the environment and behavior, to produce socially significant improvement in human behavior, but does not include: (A) Psychological testing, (B) neuropsychology, (C) cognitive therapy, (D) sex therapy, (E) psychoanalysis, (F) hypnotherapy, (G) cognitive behavioral therapy, (H) psychotherapy, or (I) long-term counseling as treatment modalities;
- (3) "Behavior analyst" means a person who is licensed to practice behavior analysis under the provisions of section 20-185k or 20-185l; and
- (4) "Assistant behavior analyst" means a person who has been certified as an assistant behavior analyst by the Behavior Analyst Certification Board to assist in the practice of behavior analysis under the supervision of a behavior analyst.
- Sec. 10. Subsection (a) of section 20-195f of the 2018 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):
- (a) No license as a marital and family therapist shall be required of: (1) A student pursuing a course of study in an educational institution meeting the requirements of section 20-195c if such activities constitute a part of his or her supervised course of study; (2) a faculty member

within an institution of higher learning performing duties consistent with his <u>or her</u> position; (3) a person holding a graduate degree in marriage and family therapy; provided (A) the activities performed or services provided by the person constitute part of the supervised work experience required for licensure under subdivision (3) of subsection (a) of section 20-195c, and (B) the exemption to the licensure requirement shall cease for a person who has completed the work experience required for licensure and received notification that he or she did not successfully complete the licensing examination, as required under subdivision (4) of subsection (a) of said section, one year after completion of such work experience; or (4) a person licensed or certified in this state in a field other than marital and family therapy practicing within the scope of such license or certification.

- Sec. 11. Subdivision (16) of section 20-474 of the 2018 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):
- (16) "Lead inspector risk assessor" means an individual who (A) performs (i) lead inspection risk assessments for the purpose of determining the presence, type, severity and location of lead-based paint hazards, including lead hazards in paint, dust, drinking water and soil, through the use of on-site testing, including, but not limited to, x-ray [(XRF)] fluorescence (XRF) analysis with portable instruments, and (ii) the collection of samples for laboratory analysis, and (B) provides suggested ways to control any identified lead hazards;
- Sec. 12. Subdivision (2) of subsection (b) of section 20-477 of the 2018 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):
- (2) A lead training provider may offer any training course or refresher training course as desired, provided each course is approved

by the department. Only <u>lead</u> training providers who have already received approval for a training course in a particular discipline, or are concurrently seeking such approval, may seek approval for a refresher training course in that discipline.

- Sec. 13. Subsection (g) of section 20-477 of the 2018 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):
- (g) The department may, after opportunity for hearing, suspend, revoke or withdraw approval of a training or refresher training course upon a finding that a <u>lead</u> training course provider has committed any of the following acts: (1) Misrepresentation or concealment of a material fact in the obtaining of approval or reapproval of a training or a refresher training course; (2) failure to submit required information or notifications in a timely manner; (3) failure to maintain requisite records; (4) falsification of records, instructor qualifications or other approval information; (5) failure to adhere to the training standards and requirements of this section; (6) failure on the part of the training manager or other person with supervisory authority over the delivery of training to comply with federal, state or local lead statutes or regulations; or (7) fraudulent issuance of a course completion document to a person who has failed to successfully complete the course or course examination. Notice of any contemplated action under this subsection, the cause of action and the date of a hearing on the action shall be given and an opportunity for hearing afforded in accordance with the provisions of chapter 54. The commissioner may petition the superior court for the judicial district of Hartford to enforce any order or action taken pursuant to this subsection. The provisions of this subsection shall not apply to applications for approval or reapproval filed pursuant to this section.

Sec. 14. Subsection (d) of section 22-6r of the 2018 supplement to the general statutes is repealed and the following is substituted in lieu

thereof (*Effective from passage*):

- (d) A food establishment, as defined in section 19a-36g, may purchase farm products that have been produced and are sold in conformance with the applicable regulations of Connecticut state agencies at a farmers' market, provided such establishment requests and obtains an invoice from the farmer or person selling farm products. The farmer or person selling farm products shall provide to the food [service] establishment an invoice that indicates the source and date of purchase of the farm products at the time of the sale.
- Sec. 15. Subsection (d) of section 51-245 of the 2018 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):
- (d) Notwithstanding the provisions of subsections (a) and (b) of this section, if any juror is deaf or hard of <u>hearing</u>, such juror shall have the assistance of a qualified interpreter who shall be present throughout the proceeding and when the jury assembles for deliberation. Such interpreter shall be provided by the Department of Rehabilitation Services at the request of the juror or the court. Such interpreter shall be subject to rules adopted pursuant to section 51-245a.

Approved May 29, 2018